Remarks:

This amendment is submitted in an earnest effort to advance this case to issue without delay.

The specification has been amended to eliminate some minor obvious errors. No new matter whatsoever has been added.

Transmitted herewith is a PTO-1449 listing the references cited in the original application and the already filed PCT search report.

Claim 1 has been amended to define the invention with greater particularity over WO 1992/029281, on which the claim in the parent case was also rejected.

New claims 2, 3, and 4 relate to further features of the invention, referring to the cannula axis (original spec. p. 2, 1. 21) and how as shown in the drawing the front and rear parts of the C-shaped holder 6 are aligned on it, and the grip part 7 is centered on this axis.

More particularly as shown in the drawing, amended claim 1 describes a blood-collecting device for newborn babies and infants, the device comprising:

a cannula 3 having a blood inlet 4 and outlet 5;

- a bow-shaped bridge element 6 having a front end in which the cannula 3 is fixed and a rear end defining with the front end a free space, the cannula outlet 5 being exposed between the ends in the free space; and
- a grip part 7 fixed on the rear end of the bridge element 6 and turnable to rotate the cannula 3.

The instant invention is aimed at a device aimed at drawing blood from newborns or babies. This is a very tricky operation that requires extreme expertise to insert the cannula in a tiny vein. In addition it is critical to draw as little blood as possible from the patient.

Accordingly this is typically done in a so-called "open" procedure where the rear end of the cannula is not simply inserted into a specimen tube as is used for adults, but is actually left open so that the blood can be dripped into a collection vessel so that only a few drops need be collected.

The result is therefore that the procedure requires not only that the user have a good grip so that the needle can be manipulated accurately, but also this good grip must not interfere with a view of the rear outlet end of the cannula so that, as soon as enough blood is collected for whatever test is being run, the cannula can be withdrawn and further blood loss from the infant avoided.

The invention provides a simple arrangement where the cannula as now claimed is fixed on the front end of a bow-shaped holder 6 on whose rear end is a grip 7 separated by a "free space" (original spec. p. 4, 1. 15) in which the rear outlet end 5 of the cannula 3 is exposed from the front holder end. The claim further clarifies that rotation of the grip 7 rotates the cannula, which is the preferred manner for accurate insulation of a fine-gauge cannula of this type.

The system of WO 1992/020281 of Wiebel is significantly different. Here the cannula 6 is held in a cup-shaped holder 3 formed unitarily with a two-arm lever 13 whose rear arm 75 can be pressed in to lift its front arm 74 out of a latch hole 19 and allow the holder 3 to be slid in a tube 4. The arm 75 cannot be equated to the holder 6 since there is nothing like a grip part on it that can be rotated to turn the cannula. Instead rotating the arm would cause the cannula of Wiebel to orbit about the axis of the arm.

Thus the §102 rejection on Wiebel is overcome. Allowance of all claims and passage to issue are in order.

If only minor problems that could be corrected by means of a telephone conference stand in the way of allowance of this

case, the examiner is invited to call the undersigned to make the necessary corrections.

K.F. Ross P.C.

/Andrew Wilford/

by: Andrew Wilford, 26,597 Attorney for Applicant

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5683 Riverdale Avenue Box 900

Bronx, NY 10471-0900

Cust. No.: 535
Tel: 718 884-6600
Fax: 718 601-1099

Email: email@kfrpc.com

Enclosure: Marked Specification

Clean Specification

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